



Horizon Blue Cross Blue Shield of New Jersey

# Dispensing Limits Drug List

Independent licensee of the Blue Cross and Blue Shield Association

QIC approved in July 2006  
 QIC approved in July 2007  
 QIC approved in September 2008  
 CIS approved in September 2009

Revised  
 3/5/10

**DISPENSING LIMITS DRUG LIST**

Limits will apply to drugs listed below, as well as the generic equivalents.

| Drug Name           | Strength                   | Dispensing Limit   |
|---------------------|----------------------------|--|
| Accolate            | 10 mg and 20 mg            | 180 tablets every 90 days  |
| Aciphex             | All strengths              | 90 tablets/capsules every 90 days Limit also includes all Proton Pump Inhibitors (Nexium, Prevacid, Prilosec, Protonix, Kapidex) |
| Actimmune injection | 2 mmu/0.5                  | 36 vials every 84 days   |
| Actiq               | All strengths              | 120 units every 30 days Limit also includes Fentora and Onsolis  |
| Actonel             | 35 mg tablets              | 13 tablets every 90 days   |
| Actonel             | 30 mg                      | 60 tablets every 365 days  |
| Actonel             | 5 mg                       | 90 tablets every 90 days   |
| Actonel             | 75 mg                      | 6 tablets every 84 days  |
| Actonel             | 150 mg                     | 3 tablets every 84 days  |
| Actonel with CA     |                            | 84 tablets (3 dispensing packs) every 84 days  |
| Actoplus Met        | 15 mg/500 mg, 15 mg/850 mg | 270 tablets every 90 days  |
| Actoplus Met XR     | 15 mg/1000 mg              | 180 tablets every 90 days  |
| Actoplus Met XR     | 30 mg/1000 mg              | 90 tablets every 90 days   |
| Actos               | 15 mg                      | 270 tablets every 90 days  |
| Actos               | 30 mg, 45 mg               | 90 tablets every 90 days   |
| Acuvail             | 0.45% ophth solution       | 30 vials of 0.4 ml (12 ml) per 1 year  |
| Adcirca             | 20 mg                      | 180 tablets every 90 days  |
| Adderall XR         | 5 mg, 10 mg, 15 mg         | 30 tablets every 30 days   |
| Adderall XR         | 20 mg, 25 mg, 30 mg        | 60 tablets every 30 days   |
| Advair Diskus       | All strengths              | 180 units (3 packs of 60 blisters or 6 packs of 28 blisters) every 90 days   |
| Advair HFA          | All strengths              | 36 grams ( 3 inhalers of 12 grams) every 90 days   |
| Aerobid             | All strengths              | 63 gm (9 inhalers of 7gm) every 90 days  |
| Aerobid M           | All strengths              | 63 gm (9 inhalers of 7gm) every 90 days  |
| Afinitor            | 5 mg and 10 mg             | 90 tablets every 90 days   |
| Aggrenox            | 200 mg                     | 180 capsules every 90 days   |

|  |                                     |  |
|--|-------------------------------------|--|
| Agrylin (including generic anagrelide hydrochloride) | 0.5 mg                              | 360 capsules every 90 days   |
| Agrylin (including generic anagrelide hydrochloride) | 1 mg                                | 900 capsules every 90 days   |
| Alinia   | 100 mg / 5 ml suspension            | 60 ml (1 bottle of 60 ml) every 30 days  |
| Alinia   | 500 mg tablet                       | 6 tablets every 30 days  |
| Allerga Suspension                                   | 30 mg/ 5 mL                         | 900 ml every 90 days   |
| Allegra  | 60 mg                               | 180 capsules every 90 days   |
| Allegra  | 180 mg                              | 90 tablets every 90 days   |
| Allegra  | 30 mg                               | 180 tablets every 90 days  |
| Allegra-D  | 120/60                              | 180 tablets every 90 days  |
| Allegra-D  | 180/240                             | 90 tablets every 90 days   |
| Allegra ODT  | 30 mg                               | 360 tablets every 90 days  |
| Alora  | 0.025 mg, 0.05 mg, 0.075 mg, 0.1 mg | 26 patches every 90 days   |
| Alvesco  | 80 mcg and 160 mcg                  | 42 grams(6 inhalers of 6.1 grams each) every 90 days   |
| Amaryl/Glimepiride                                   | 1 mg                                | 720 tablets every 90 days  |
| Amaryl/Glimepiride                                   | 2 mg                                | 360 tablets every 90 days  |
| Amaryl/Glimepiride                                   | 3 mg                                | 180 tablets every 90 days  |
| Ambien   | All strengths                       | 90 tablets every 90 days Limit also includes Ambien CR, Lunesta, Edluar, and Sonata  |
| Ambien CR  | All strengths                       | 90 tablets every 90 days Limit also includes Ambien, Edluar, Lunesta, and Sonata   |
| Amerge   | All strengths and dosage forms      | 54 tablets/ml/units every 90 days<br>Limit also includes all oral and nasal spray formulations of TRIPTANs (Axert, Frova, Imitrex, Maxalt, Maxalt MLT, Relpax, Treximet, Zomig, Zomig ZMT) |
| Amitiza  | 8 mcg and 24 mcg                    | 180 capsules every 90 days   |
| Amrix  | 15 mg and 30 mg                     | 90 capsules every 90 days  |
| Androderm  | All strengths                       | 90 patches every 90 days   |
| Androgel   | All strengths                       | 900 gm every 90 days   |
| Anzemet  | 50 mg                               | 20 tablets per prescription  |
| Anzemet  | 100 mg                              | 10 tablets per prescription  |
| Apokyn   | 30 mg / 3 ml                        | 180 ml every 90 days   |
| Aranesp and Aranesp Albumin Free                     | All strengths except 500 mcg        | 6 injections (6 ml) every 84 days  |

|  |   |   |
|--|---|---|
| Aranesp and Aranesp Albumin Free   | 500 mcg                                 | 4 injections (4 ml) every 84 days   |
| Aricept  | All strengths                           | 90 tablets every 90 days  |
| Arixtra  | All strengths                           | 90 injections every 90 days   |
| Asmanex twisthaler   | 110 mcg                                 | 3 inhalers of 0.135 gm / inhaler every 90 days  |
| Asmanex twisthaler   | 220 mcg                                 | 3 inhalers of 0.24 gm / inhaler every 90 days   |
| Astelin and Astepro (based on new formulation of 200 metered sprays in 30ml) | All strengths                           | 120 ml (4 bottles of 30 ml) every 90 days   |
| Atrovent   | 18 mcg                                  | 90 gm (6 inhalers of 15 gm) every 90 days   |
| Atrovent solution  | 0.02% solution for inhalation           | 900 ml (6 boxes of 60 units of 2.5 ml) every 90 days  |
| Avandamet  | 2 mg/500 mg                             | 180 tablets every 90 days   |
| Avandamet  | 2 mg/1000 mg, 4 mg/500 mg, 4 mg/1000 mg | 180 tablets every 90 days   |
| Avandaryl  | 4 mg/2 mg                               | 180 tablets every 90 days   |
| Avandaryl  | 4 mg/4 mg, 8 mg/2 mg, 8 mg/4 mg         | 90 tablets every 90 days  |
| Avandia  | 2 mg, 4 mg                              | 180 tablets every 90 days   |
| Avandia  | 8 mg                                    | 90 tablets every 90 days  |
| Avelox ABC   | 400 mg                                  | 15 tablets per prescription   |
| Avelox tablets   | 400 mg                                  | 15 tablets per prescription   |
| Avinza   | All strengths                           | 30 capsules every 30 days   |
| Avonex injection   | 30 mcg                                  | 12 injections every 84 days   |
| Axert  | All strengths and dosage forms          | 54 tablets/ml/units every 90 days<br>Limit also includes all oral and nasal spray formulations of TRIPTANS (Amerge, Frova, Imitrex, Maxalt, Maxalt MLT, Relpax, Treximet, Zomig, Zomig ZMT) |
| Azilect  | 0.5 mg and 1 mg                         | 90 tablets every 90 days  |
| Azmacort   | All strengths                           | 120 gm (6 inhalers of 20 gm) every 90 days  |
| Beconase AQ  | All strengths                           | 100 gm (4 bottles of 25 gm) every 90 days   |
| Bepreve  | 1.5%                                    | 10 ml every 60 days   |
| Betaseron injection  | 0.3 mg                                  | 45 injections every 90 days   |
| Biaxin   | 250 mg                                  | 28 tablets per prescription   |
| Biaxin   | 500 mg                                  | 28 tablets per prescription   |

|                      |   |  |
|----------------------|---|--|
| Biaxin XL            | 500 mg  | 28 tablets per prescription                          |
| Boniva               | 150 mg  | 3 tablets every 84 days                              |
| Boniva               | 2.5 mg  | 90 tablets every 90 days                             |
| Bravelle vials       | 75 IU   | 4,500 IU equivalent every 30 days                    |
| Brovana              | 15 mcg/2 ml   | 360 ml (180 units of 2 ml) every 90 days             |
| Butorphanol tartrate | 10 mg/ml nasal spray                                    | 36 ml (12 bottles of 3 ml) every 90 days             |
| Byetta inj pen       | 5 mcg   | 3 pens of 1.2 ml (6 ml) every 90 days                |
| Byetta inj pen       | 10 mcg / 0.04 ml  | 3 pens of 2.4 ml (9 ml) every 90 days                |
| Bystolic             | 2.5 mg, 5 mg, 10 mg                                     | 360 tablets every 90 days                            |
| Bystolic             | 20 mg   | 180 tablets every 90 days                            |
| Caduet               | All strengths   | 90 tablets every 90 days                             |
| Catapres-TTS         | TTS-1   | 13 patches every 90 days                             |
| Catapres-TTS         | TTS-2   | 13 patches every 90 days                             |
| Catapres-TTS         | TTS-3   | 13 patches every 90 days                             |
| Causton              | 75 mg inhalation kit                                    | 1 kit every 56 days                                  |
| Celebrex             | 50 mg   | 180 capsules every 90 days                           |
| Celebrex             | 400 mg  | 90 capsules every 90 days                            |
| Celebrex             | 100 mg  | 180 capsules every 90 days                           |
| Celebrex             | 200 mg  | 180 capsules every 90 days                           |
| Cesamet              | 1 mg  | 20 capsules every 30 days                            |
| Cetrotide kit        | 3 mg  | 1 kit every 30 days                                  |
| Cetrotide kit        | 0.25 mg   | 5 injections every 30 days                           |
| Chantix              | All Strengths   | 56 tablets every 28 days                             |
| Chlorpropamide       | 100 mg  | 720 tablets every 90 days                            |
| Chlorpropamide       | 250 mg  | 270 tablets every 90 days                            |
| Cimzia               | 200 mg/ml syringe                                       | 6 injections every 84 days                           |
| Cipro XR             | 500 mg, 1000 mg   | 15 tablets per prescription                          |
| Clarinet             | 5 mg (includes Reditab)                                 | 90 tablets every 90 days                             |
| Clarinet syrup       | 0.5 mg/ml   | 900 ml every 90 days                                 |
| Clarinet-D 12 hour   | 2.5-120 mg  | 180 tablets every 90 days                            |
| Clarinet-D 24 hour   | 5-240 mg  | 90 tablets every 90 days                             |
| Climara              | 0.025 mg, 0.0375 mg, 0.05 mg, 0.06 mg, 0.075 mg, 0.1 mg | 13 patches every 90 days                             |
| Climara Pro          | 4.40 mg/1.39 mg   | 13 patches every 90 days                             |
| Clomid / Serophene   | 50 mg   | 10 tablets every 30 days (30 tablets every 365 days) |
| Cognex               | All strengths   | 360 capsules every 90 days                           |

|   |   |  |
|---|---|--|
| Combipatch  | 0.05 mg / 0.14 mg and 0.05 mg / 0.25 mg | 26 patches every 90 days   |
| Combivent   | All strengths                           | 90 gm (6 inhalers of 15 gm) every 90 days                            |
| Concerta  | 18 mg, 27 mg, 54 mg                     | 30 tablets every 30 days   |
| Concerta  | 36 mg                                   | 60 tablets every 30 days   |
| Copaxone kit  | 20 mg/ml                                | 3 kits / 90 injections every 90 days                                 |
| Copegus tablets   | 200 mg                                  | 588 tablets every 84 days Limit also includes Rebetol and Ribasphere |
| Cromolyn Sodium   | 20 mg / 2 ml solution for inhalation    | 720ml (3 boxes of 120 vials of 2 ml) every 90 days                   |
| Cymbalta  | 20 mg                                   | 180 capsules every 90 days   |
| Cymbalta  | 30 mg, 60 mg                            | 90 capsule every 90 days   |
| Darvocet  | All strengths                           | 540 tablets every 90 days  |
| Daytrana  | All strengths                           | 90 patches every 90 days   |
| Delatestryl 1ml syringe(testosterone enanthate) (in oil)      | 200 mg/ml                               | 10 ml (10 syringes) every 90 days                                    |
| Delatestryl 5ml vial(testosterone enanthate - in oil)         | 200 mg/ml                               | 10 ml (2 vials) every 90 days  |
| Depo Provera  | 150 mg/ml                               | 1 injection every 90 days  |
| Depo-testosterone 10ml vial (testosterone cypionate - in oil) | 200 mg/ml                               | 10 ml (1 vial) every 90 days   |
| Depo-testosterone 10ml vial (testosterone cypionate - in oil) | 100 mg/ml                               | 40 ml (4 vials) every 90 days  |
| Depo-testosterone 1ml vial (testosterone cypionate - In oil)  | 200 mg/ml                               | 10 ml (10 vials) every 90 days                                       |
| Detrol  | 1 mg and 2 mg                           | 180 tablets every 90 days  |
| Detrol LA   | 2 mg and 4 mg                           | 90 capsules every 90 days  |
| Diabeta/Micronase/Glyburide                                   | 1.25 mg, 2.5 mg                         | 720 tablets every 90 days  |
| Diabeta/Micronase/Glyburide                                   | 5 mg                                    | 360 tablets every 90 days  |
| Dilaudid (including generic hydromorphone)                    | 1 mg/1 mL oral solution                 | 1200 ml every 30 days  |
| Dilaudid (including generic hydromorphone)                    | 2 mg, 4 mg, and 8 mg                    | 180 tablets every 30 days  |
| Ditropan (including generic oxybutynin)                       | 5 mg                                    | 360 tablets every 90 days  |
| Ditropan (including generic oxybutynin)                       | 5 mg syrup (5 mg/5 mL)                  | 1800 ml every 90 days  |
| Ditropan XL   | 10 mg and 15 mg                         | 180 tablets every 90 days  |
| Ditropan XL   | 5 mg                                    | 90 tablets every 90 days   |

|  |  |   |
|--|--|---|
| Divigel                                  | 0.25 mg, 0.5 mg, 1 mg                          | 90 packets every 90 days  |
| Dostinex                                 | 0.5 mg tablets                                 | 52 tablets every 90 days  |
| Duetact                                  | 30 mg/2 mg, 30 mg/4 mg                         | 90 tablets every 90 days  |
| Duragesic                                | All strengths                                  | 15 patches every 30 days  |
| Edluar                                   | 5 mg and 10 mg                                 | 90 tablets every 90 days Limit also includes Ambien, Ambien CR, Lunesta, and Sonata |
| Effient                                  | 5 mg and 10 mg                                 | 90 tablets every 90 days  |
| Elestat                                  | 0.05% soln                                     | 15 ml (3 bottles) every 90 days   |
| Elestrin                                 | 0.06% gel                                      | 144 grams (1 pump) every 90 days  |
| Eligard injection                        | 30 mg  | 1 injection per prescription / 3 prescriptions every 365 days                       |
| Eligard injection                        | 7.5 mg   | 1 injection per prescription / 12 prescriptions every 365 days                      |
| Eligard injection                        | 22.5 mg  | 1 injection per prescription / 4 prescriptions every 365 days                       |
| Eligard injection                        | 45 mg  | 1 injection per prescription / 2 prescriptions every 365 days                       |
| Embeda                                   | All strengths                                  | 60 capsules every 30 days   |
| Emend                                    | 125 mg   | 2 capsules per prescription   |
| Emend                                    | 80 mg  | 4 capsules per prescription   |
| Emend                                    | 40 mg  | 4 capsules per prescription   |
| Emend therapy pack                       | 80 mg / 125 mg                                 | 6 capsules or 2 packs per prescription  |
| Emsam                                    | 6 mg/24 hour, 9 mg/24 hour, and 12 mg/24 hours | 90 patches every 90 days  |
| Enablex                                  | 7.5 mg and 15 mg                               | 90 tablets every 90 days  |
| Enbrel injection and SureClick Injection | 50 mg  | 12 injections every 84 days   |
| Enbrel injection                         | 25 mg  | 24 injections every 84 days   |
| Epipen                                   | 0.3 mg syr                                     | 2 pens of 0.3 ml per prescription   |
| Epipen-JR                                | 0.15 mg syr                                    | 2 pens of 0.3 ml per prescription   |
| Epogen injection                         | All except 40,000 unit vial                    | 36 injections every 84 days   |
| Epogen injection                         | 40,000 unit vial                               | 18 injections every 84 days   |
| Esclim                                   | 0.025 mg, 0.0375 mg, 0.05 mg, 0.075 mg, 0.1 mg | 26 patches every 90 days  |
| Estraderm                                | 0.05 mg, 0.1 mg                                | 26 patches every 90 days  |
| Estring                                  |  | 1 ring every 90 days  |
| Estrogel                                 | 0.06%  | 558 gm (6 pumps of 93 gm) every 365 days (1 year)                                   |

|                                  |                                  |  |
|----------------------------------|----------------------------------|--|
| Evamist                          | 1.53 mg/spray                    | 49 ml (6 pumps) every 90 days                                  |
| Exelon                           | All strengths                    | 180 capsules every 90 days                                     |
| Exelon syrup                     | 2 mg/ml                          | 540 ml every 90 days   |
| Exelon patch                     | 4.6 mg/24 hours, 9.5 mg/24 hours | 90 patches every 90 days                                       |
| Extavia                          | 0.3 mg                           | 45 injections every 90 days                                    |
| Exubera Kit                      |                                  | 1 kit per prescription / 1 prescription every 365 days         |
| Exubera Combination Pack 12      |                                  | 540 units (3 boxes) every 90 days                              |
| Exubera Combination Pack 15      |                                  | 810 units (3 boxes) every 90 days                              |
| Exubera Chamber and Release Unit |                                  | 1 fill per prescription / 1 prescription every 365 days        |
| Factive                          | 320 mg                           | 15 tablets every prescription                                  |
| Femring                          |                                  | 1 ring every 90 days   |
| Fentora                          | All Strengths                    | 120 tablets every 30 days Limit also include Actiq and Onsolis |
| Fexmid                           | 7.5 mg                           | 270 tablets every 90 days                                      |
| Fioricet                         | 325/40/40                        | 540 tablets every 90 days                                      |
| Fioricet w/Codeine               | 30/325/40/50                     | 540 capsules every 90 days                                     |
| Fiorinal capsule                 | 325/40/50                        | 540 capsules every 90 days                                     |
| Fiorinal w/Codeine               | 30/325/40/50                     | 540 capsules every 90 days                                     |
| Flector                          | 1.3% Patches                     | 180 patches every 90 days                                      |
| Flexeril                         | All strengths                    | 270 tablets every 90 days                                      |
| Flonase                          | All strengths                    | 48 gm (3 bottles of 16 gm) every 90 days                       |
| Flovent/Flovent HFA              | All strengths                    | 78 gm (6 inhalers of 13 gm [220 mcg/inh]) every 90 days        |
| Flovent Diskus                   | All strengths                    | 720 units (12 boxes of 60 doses [250 mcg/inh]) every 90 days   |
| Flovent Rotadisk                 | All strengths                    | 720 units (12 boxes of 60 doses [250 mcg/inh]) every 90 days   |
| Flunisolide nasal                | 0.03%                            | 200ml (8 bottles of 25ml) every 90 days                        |
| Focalin XR                       | All strengths except 20 mg       | 30 tablets every 30 days                                       |
| Focalin XR                       | 20 mg                            | 60 tablets every 30 days                                       |
| Follistim AQ injection           | All strengths                    | 4,500 IU equivalent every 30 days                              |
| Foradil                          | All strengths                    | 180 units (3 boxes of 60 unit doses) every 90 days             |
| Fortamet                         | 500 mg                           | 360 tablets every 90 days                                      |

|                             |                                |   |
|-----------------------------|--------------------------------|---|
| Fortamet                    | 1000 mg                        | 180 tablets every 90 days   |
| Forteo injection            | 750 mg / 3 ml                  | 9 ml or 3 injection pens every 84 days  |
| Fosamax                     | 35 mg, 70 mg tablets           | 13 tablets every 90 days  |
| Fosamax                     | 40 mg                          | 90 tablets every 90 days for 6 months out of 1 year   |
| Fosamax                     | 5 mg and 10 mg                 | 90 tablets every 90 days  |
| Fosamax oral solution       | 70 mg/75 mL                    | 975 mL every 90 days  |
| Fosamax Plus D              |                                | 12 tablets every 84 days  |
| Fragmin                     | All strengths                  | 90 injections every 90 days   |
| Frova                       | All strengths and dosage forms | 54 tablets/ml/units every 90 days<br>Limit also includes all oral and nasal spray formulations of TRIPTANs (Amerge, Axert, Imitrex, Maxalt, Maxalt MLT, Relpax, Treximet, Zomig, Zomig ZMT) |
| Fuzeon injection kit        |                                | 3 kits or 180 injections every 90 days  |
| Ganirelix Acetate           | 250 mcg/0.5 ml                 | 5 injections every 30 days  |
| Gelnique                    | 10% gel sachets/packets        | 90 packets every 90 days  |
| Gleevec tablets             | 100 mg                         | 270 tablets every 90 days   |
| Gleevec tablets             | 400 mg                         | 180 tablets every 90 days   |
| Glimepiride/Amaryl          | 1 mg                           | 720 tablets every 90 days   |
| Glimepiride/Amaryl          | 2 mg                           | 360 tablets every 90 days   |
| Glimepiride/Amaryl          | 3 mg                           | 180 tablets every 90 days   |
| Glucophage/Metformin        | 500mg                          | 450 tablets every 90 days   |
| Glucophage/Metformin        | 850 mg                         | 270 tablets every 90 days   |
| Glucophage/Metformin        | 1000 mg                        | 225 tablets every 90 days   |
| Glucophage XR/Metformin XR  | 500 mg                         | 360 tablets every 90 days   |
| Glucophage XR/Metformin XR  | 750 mg                         | 180 tablets every 90 days   |
| Glucotrol/Glipizide         | 5 mg                           | 720 tablets every 90 days   |
| Glucotrol/Glipizide         | 10 mg                          | 360 tablets every 90 days   |
| Glucotrol XL/Glipizide XL   | 2.5 mg                         | 720 tablets every 90 days   |
| Glucotrol XL/Glipizide XL   | 5 mg                           | 360 tablets every 90 days   |
| Glucotrol XL/Glipizide XL   | 10 mg                          | 180 tablets every 90 days   |
| Glumetza                    | 500mg                          | 360 tablets every 90 days   |
| Glumetza                    | 1000 mg                        | 180 tablets every 90 days   |
| Glyburide/Diabeta/Micronase | 1.25 mg, 2.5 mg                | 720 tablets every 90 days   |
| Glyburide/Diabeta/Micronase | 5 mg                           | 360 tablets every 90 days   |
| Glynase Prestabs            | 1.5 mg, 3 mg                   | 360 tablets every 90 days   |

|  |  |   |
|--|--|---|
| Glynase Prestabs                                 | 4.5 mg, 6 mg                                     | 180 tablets every 90 days   |
| Gonal-F injection                                | All strengths                                    | 4,500 IU equivalent every 30 days   |
| Helidac  |  | 1 kit every 30 days   |
| Humira injection and Humira Pen Injection        | 40 mg / 0.8 ml                                   | 6 injections every 84 days  |
| Humira injection and Humira Pen Injection        | 20 mg / 0.4 ml                                   | 6 injections every 84 days  |
| Humira injection Crohn's Disease Starter Package | 40 mg / 0.8 ml                                   | 6 injections (1 package) per lifetime   |
| Humira Injection Psoriasis Starter Package       | 40 mg/0.8 ml                                     | 4 injections (1 package) per lifetime   |
| Imitrex  | All strengths and dosage forms except injections | 54 tablets/ml/units every 90 days<br>Limit also includes all oral and nasal spray formulations of TRIPTANs (Amerge, Axert, Frova, Maxalt, Maxalt MLT, Relpax, Treximet, Zomig, Zomig ZMT) |
| Imitrex  | 6MG/0.5ML INJECTION                              | 24 mL (48 injections) every 90 days   |
| Infergen injection                               | 15 mcg   | 36 injections (18 ml) every 84 days   |
| Infergen injection                               | 9 mcg  | 36 injections (11 ml) every 84 days   |
| Innohep  | All strengths                                    | 10 injections per prescription  |
| Intal inhaler                                    | 0.8 mg   | 63 gm (4 inhalers of 15 gm or 7 inhalers of 7 gm) every 90 days   |
| Intal solution                                   | 20 mg / 2 ml solution for inhalation             | 720 units (3 boxes of 120 vials [2 ml/vial]) every 90 days  |
| Intuniv  | 1 mg, 2, mg, 3 mg, 4 mg                          | 90 tablets every 90 days  |
| Ipratropium Bromide solution                     | 0.02% solution for inhalation                    | 900 ml (6 boxes of 60 units of 2.5 ml) every 90 days  |
| Iressa tablets                                   | 250 mg   | 90 tablets every 90 days  |
| Isentress  | 400 mg   | 180 tablets every 90 days   |
| Istalol  | 0.50%  | 30 ml (6 bottles of 5 ml) every 365 days (1 year)   |
| Januvia  | All strengths                                    | 90 tablets every 90 days  |
| Kadian   | All strengths                                    | 120 capsules every 30 days  |
| Kapidex  | All strengths                                    | 90 tablets/capsules every 90 days Limit also includes all Proton Pump Inhibitors (Nexium, Prevacid, Prilosec, Protonix, Aciphex)  |
| Ketek  | 400 mg   | 20 tablets per prescription   |
| Ketorolac  | 10 mg tablets                                    | 20 tablets per prescription   |
| Kineret injection                                |  | 84 injections every 84 days   |

|                         |                     |  |
|-------------------------|---------------------|--|
| Kytril                  | 1 mg tablet         | 20 tablets per prescription  |
| Kytril                  | 2 mg/10 ml solution | 30 ml per prescription   |
| Lamisil tablet          | 250 mg              | 90 tablets every 365 days  |
| Lamisil granules packet | 125 mg and 187.5 mg | 42 packets every 365 days  |
| Lariam                  | 250 mg              | 15 tablets every 90 days   |
| Letairis                | 5 mg and 10 mg      | 90 tablets every 90 days   |
| Leukine                 | 250 mcg powder      | 42 vials every 84 days   |
| Leukine                 | 500 mcg/ml vial     | 42 ml (42 vials) every 84 days   |
| Levaquin                | 250 mg and 500 mg   | 15 tablets per prescription  |
| Levaquin                | 750 mg              | 15 tablets per prescription  |
| Levaquin LEVA-PAK       | 750 mg              | 15 tablets per prescription  |
| Lorcet                  | All strengths       | 450 tablets every 90 days Limit also includes Lortab and Vicodin                   |
| Lorcet-HD               | All strengths       | 450 units every 90 days Limit also includes Lortab and Vicodin                     |
| Lortab                  | All strengths       | 450 units every 90 days Limit also includes Lortab and Vicodin                     |
| Lortab Elixir           | 2.5/167             | 8100 ml every 90 days  |
| Lovaza                  | 1 gram              | 360 capsules every 90 days   |
| Lovenox                 | All strengths       | 90 injections every 90 days  |
| Lumigan                 | 0.03%               | 10 ml (4 bottles of 2.5 ml or 2 bottles of 5 ml) every 90 days                     |
| Lunesta                 | All strengths       | 90 tablets every 90 days Limit also includes Ambien, Ambien CR, Edluar, and Sonata |
| Lupron 2 week           | 5 mg                | 6 vials every 84 days  |
| Lupron Depot            | 3.75 mg             | 1 injection per prescription / 12 prescriptions every 365 days                     |
| Lupron Depot            | 30 mg               | 1 injection per prescription / 3 prescriptions every 365 days                      |
| Lupron Depot            | 22.5 mg             | 1 injection per prescription / 4 prescriptions every 365 days                      |
| Lupron Depot            | 7.5 mg              | 1 injection per prescription / 12 prescriptions every 365 days                     |
| Lupron Depot            | 11.25 mg            | 1 injection per prescription / 4 prescriptions every 365 days                      |

|                            |                                |  |
|----------------------------|--------------------------------|--|
| Lupron Depot-ped           | 11.25 mg                       | 1 injection per prescription /13 prescriptions every 365 days  |
| Lupron Depot-ped           | 15 mg                          | 1 injection per prescription / 13 prescriptions every 365 days   |
| Lupron Depot-ped           | 7.5 mg                         | 1 injection per prescription / 13 prescriptions every 365 days   |
| Luveris                    | 75 units                       | 60 vials (4500 units) every 30 days  |
| Magnacet                   | all strenghts                  | 240 tablets every 30 days  |
| Maxair Autohaler           | All strenghts                  | 84 gm (3 inhalers of 14 gm) every 90 days  |
| Maxalt/Maxalt MLT          | All strengths and dosage forms | 54 tablets/ml/units every 90 days<br>Limit also includes all oral and nasal spray formulations of TRIPTANs (Amerge, Axert, Frova, Imitrex, Relpax, Treximet, Zomig, Zomig ZMT) |
| Maxaquin                   | 400 mg                         | 15 tablets every prescription  |
| Menopur                    | 75 units                       | 60 vials (4500 units) every 30 days  |
| Menostar                   | 14 mcg/day patch               | 13 patches every 90 days   |
| Mepron                     | 750 mg/5 mL                    | 900 mL every 90 days   |
| Meridia                    | All strengths                  | 90 capsules every 90 days  |
| Metadate CD                | 10 mg                          | 30 capsules every 30 days  |
| Metadate CD                | 20 mg and 30 mg                | 60 capsules every 30 days  |
| Metadate ER                | 10 mg and 20 mg                | 90 tablets every 30 days Limits also includes Methylin ER and Ritalin SR   |
| Metformin/Glucophage       | 500mg                          | 450 tablets every 90 days  |
| Metformin/Glucophage       | 850 mg                         | 270 tablets every 90 days  |
| Metformin/Glucophage       | 1000 mg                        | 225 tablets every 90 days  |
| Metformin XR/Glucophage XR | 500 mg                         | 360 tablets every 90 days  |
| Metformin XR/Glucophage XR | 750 mg                         | 180 tablets every 90 days  |

|                              |                      |   |
|------------------------------|----------------------|---|
| Methylin ER                  | 10 mg and 20 mg      | Metadate ER<br>and Ritalin SR   |
| Micronase/Glyburide/Diabetra | 1.25 mg, 2.5 mg      | 720 tablets every 90 days   |
| Micronase/Glyburide/Diabetra | 5 mg                 | 360 tablets every 90 days   |
| Migranal                     | 4 mg/ml              | 24 ml (4 kits) every 90 days  |
| Mobic                        | 7.5 mg               | 180 tablets every 90 days   |
| Mobic                        | 15 mg                | 90 tablets every 90 days  |
| Mobic                        | 7.5 mg/5 mL          | 900 ml every 90 days  |
| MS Contin                    | All strengths        | 120 capsules every 30 days Limit also includes<br>Oramorph SR   |
| MSIR solution                | 20 mg/ml             | 270 ml every 30 days  |
| MSIR solution                | 20 mg / 5 ml         | 500 ml every 30 days  |
| MSIR solution                | 10 mg/5ml            | 500 ml every 30 days  |
| MSIR tablets                 | All strengths        | 180 tablets every 30 days   |
| Namenda                      | 10 mg tablet         | 180 tablets every 90 days   |
| Namenda                      | 5 mg tablet          | 180 tablets every 90 days   |
| Namenda                      | 5-10 mg TITRATION PK | 1 packet (49 tablets) every 365 days  |
| Nasacort AQ                  | All strengths        | 51 gm (3 bottles of 17 gm) every 90 days  |
| Nasarel                      | 0.03%                | 200ml (8 bottles of 25ml) every 90 days   |
| Nasonex                      | All strengths        | 51 gm (3 bottles of 17 gm) every 90 days  |
| Neulasta injection           | 6 mg                 | 6 injections every 84 days  |
| Neumega injection            | 5 mg                 | 63 injections every 90 days   |
| Neupogen injection           | All strengths        | 42 injections every 90 days   |
| Neupro                       | All strengths        | 90 patches every 90 days  |
| Nexavar                      | 200 mg               | 360 tablets every 90 days   |
| Nexium                       | All strengths        | 90 tablets/capsules every 90 days Limit also<br>includes all Proton Pump Inhibitors (Aciphex,<br>Prevacid, Prilosec, Protonix, Kapidex) |
| Novarel vials                |                      | 2 vials every 30 days   |
| Noxafil Oral Suspension      | 40 mg/ml             | 1800 ml every 90 days   |
| Nucynta                      | all strenghts        | 180 tablets every 30 days   |
| Nuvaring                     |                      | 3 rings every 84 days   |
| Nuvigil                      | 150 mg and 250 mg    | 90 tablets every 90 days  |
| Nuvigil                      | 50 mg kit            | 180 tablets every 90 days   |

|   |                                      |  |
|---|--------------------------------------|--|
| Omnaris                                     | 50 mcg/actuation - 12.5 grams/bottle | 39 grams (3 bottles of 12.5 grams each) per 90 days            |
| Onglyza                                     | 2.5 mg and 5 mg                      | 90 tablets every 90 days                                       |
| Onsolis                                     | All strengths                        | 120 tablets every 30 days Limit also include Actiq and Fentora |
| Opana                                       | All strengths                        | 120 tablets every 30 days                                      |
| Opana ER                                    | All strengths                        | 120 tablets every 30 days                                      |
| Optivar                                     | 0.05%                                | 18 ml (3 bottles of 6 ml) every 90 days                        |
| Oramorph SR                                 | All strengths                        | 120 capsules every 30 days Limit also includes MS Contin       |
| Ortho Evra                                  |                                      | 10 patches every 90 days                                       |
| Ovidrel vials                               |                                      | 2 vials every 30 days  |
| Oxycodone Immediate Release                 | All Strengths                        | 180 tablets/capsules every 30 days                             |
| Oxycodone oral solution                     | 5 mg/5 mL                            | 600 ml every 30 days   |
| Oxycontin                                   | All strengths                        | 120 tablets every 30 days                                      |
| Oxydose                                     | 20 mg/ml                             | 30 ml every 30 days Limit also includes Oxyfast solution       |
| Oxyfast                                     | 20 mg/ml                             | 30 ml every 30 days Limit also includes Oxydose solution       |
| Oxytrol                                     |                                      | 26 patches every 90 days                                       |
| Patanase                                    | 0.60%                                | 93 g (3 bottles of 30.5g each) every 90 days                   |
| Patanol                                     | 0.10%                                | 15 ml (3 bottles of 5 ml or 6 bottles of 2.5 ml) every 90 days |
| Pegasys injection                           | 180 mcg                              | 12 injections every 84 days                                    |
| Peg-intron injection                        | All strengths                        | 12 injections every 84 days                                    |
| Percocet                                    | All strengths                        | 240 tablets every 30 days                                      |
| Perforomist                                 | 20 mcg / 2 ml                        | 360 ml every 90 days   |
| Persantine (including generic dipyridamole) | 25 mg and 75 mg                      | 360 tablets every 90 days                                      |
| Persantine (including generic dipyridamole) | 50 mg                                | 720 tablets every 90 days                                      |
| Plavix (including generic clopidogrel)      | 75 mg and 300 mg                     | 90 tablets every 90 days                                       |
| Plenaxis                                    | 100 mg vial                          | 3 vials every 84 days  |
| Pletal (including generic cilostazol)       | 50 mg                                | 270 tablets every 90 days                                      |
| Pletal (including generic cilostazol)       | 100 mg                               | 180 tablets every 90 days                                      |
| Pravigard PAC                               | All strengths                        | 90 tablets every 90 days                                       |
| Pregnyl vials                               | All strengths                        | 2 vials every 30 days  |

|                        |                                |  |
|------------------------|--------------------------------|--|
| Prevacid               | All strengths                  | 90 tablets/capsules every 90 days Limit also includes all Proton Pump Inhibitors (Aciphex, Nexium, Prilosec, Protonix, Kapidex)  |
| Prevpac                |                                | 14 packs (1 pack contains 8 tablets) every 30 days   |
| Priftin                | 150 mg tablets                 | 104 tablets every 90 days  |
| Prilosec               | All strengths                  | 90 tablets/capsules every 90 days Limit also includes all Proton Pump Inhibitors (Aciphex, Nexium, Prevacid, Protonix, Kapidex) except generic Prilosec (omeprazole) 20 mg |
| Procentra              | 5mg/5ml                        | 1419 ml (3 bottles of 473ml each) per 90 days  |
| Procrit injection      | All except 40,000 unit vial    | 36 injections every 84 days  |
| Procrit injection      | 40,000 unit vial               | 18 injections every 84 days  |
| Promacta               | 25 mg and 50 mg                | 30 tablets every 30 days   |
| Protonix               | All strengths                  | 90 tablets/capsules/packets every 90 days Limit also includes all Proton Pump Inhibitors (Aciphex, Nexium, Prevacid, Prilosec, Kapidex)                                    |
| Provigil               | 100 mg, 200 mg                 | 180 tablets every 90 days  |
| Prozac weekly          |                                | 13 capsules every 90 days  |
| Pulmicort respules     | All strengths except 1 mg/2 mL | 360 ml (6 boxes of 30 vials [2 ml per vial]) every 90 days   |
| Pulmicort respules     | 1 mg/2 mL                      | 180 ml (3 boxes of 30 vials [2 ml per vial]) every 90 days   |
| Pulmicort Turbuhaler   | 200 mcg                        | 6 units/ inhalers every 90 days  |
| Pulmicort Flexhaler    | 90 mcg and 100 mcg             | 6 units/ inhalers every 90 days  |
| Pulmozyme solution     | 1 mg/ml                        | 450 ml or 180 amps every 90 days   |
| Pylera                 | 125-125 mg                     | 120 capsules every 30 days   |
| Qvar                   | All strengths                  | 64 gm (8 inhalers of 8 gm) every 90 days   |
| Ranexa                 | 500 mg                         | 180 tablets every 90 days  |
| Ranexa                 | 1000 mg                        | 180 tablets every 90 days  |
| Rapaflo                | 4 mg and 8 mg                  | 90 capsules every 90 days  |
| Raptiva kit            | 125 mg                         | 12 injections every 84 days  |
| Razadyne/Reminyl       | All strengths                  | 180 tablets every 90 days  |
| Razadyne ER            | 8 mg, 16 mg and 24 mg          | 90 capsules every 90 days  |
| Razadyne oral solution | 4mg/mL                         | 540 mL every 90 days   |
| Rebetol capsules       | 200 mg                         | 588 capsules every 84 days Limit also includes Copegus, Ribasphere   |

|                      |                                |  |
|----------------------|--------------------------------|--|
| Rebetol solution     | 40 mg/ml                       | 2940 ml every 84 days  |
| Rebetron kit         | All strengths                  | 6 kits every 90 days   |
| Rebif injection      | 22 mcg/.5 & 44 mcg/.5          | 36 injections every 84 days  |
| Rebif titration pack | Titration Pack                 | 1 pack per prescription / 1 prescription per 365 days  |
| Regranex             | 0.01% gel                      | 30 gm every 365 days   |
| Relenza              | 5 mg                           | 20 blisters (1 package) every 365 days   |
| Relpax               | All strengths and dosage forms | 54 tablets/ml/units every 90 days<br>Limit also includes all oral and nasal spray formulations of TRIPTANs (Amerge, Axert, Frova, Imitrex, Maxalt, Maxalt MLT, Treximet, Zomig, Zomig ZMT) |
| Repronex vials       | 75 IU                          | 60 vials every 30 days   |
| Revatio              | 20 mg                          | 270 tablets every 90 days  |
| Revlimid             | 5 mg and 10 mg                 | 90 capsules every 90 days  |
| Revlimid             | 15 mg and 25 mg                | 63 capsules every 84 days  |
| Rhinocort AQ         | All strengths                  | 54 gm (6 inhalers of 9 gm) every 90 days   |
| Ribasphere/Ribatab   | 600 mg                         | 168 tablets every 84 days  |
| Ribasphere/Ribatab   | 400 mg                         | 252 tablets every 84 days  |
| Ribasphere/Ribavirin | 200 mg                         | 588 capsules/tablets every 84 days Limit also includes Copegus, Rebetol  |
| Ribatab              | 400 mg & 600 mg                | 168 tablets every 84 days  |
| Ribavirin            | 500 mg                         | 168 tablets every 84 days  |
| Riomet               | 500 mg/5 ml                    | 2340 mL every 90 days  |
| Ritalin LA           | 10 mg, 20 mg, 40 mg            | 30 tablets every 30 days   |
| Ritalin LA           | 30 mg                          | 60 tablets every 30 days   |
| Ritalin SR           | 20 mg                          | 90 tablets every 30 days Limit also includes Metadate ER and Methylin ER   |
| Rozerem              | 8 mg                           | 90 tablets every 90 days   |
| Ryzolt ER            | 100 mg, 200 mg, and 300 mg     | 90 tablets every 90 days   |
| Sabril               | 500 mg                         | 540 tablets every 90 days  |
| Samsca               | 15 mg                          | 10 tablets per prescription, 3 prescriptions per 365 days  |
| Samsca               | 30 mg                          | 20 tablets per prescription, 3 prescriptions per 365 days  |
| Sanctura             | 20 mg                          | 180 tablets every 90 days  |
| Santura XR           | 60 mg                          | 90 tablets every 90 days   |

|                         |  |   |
|-------------------------|--|---|
| Sancuso Patch           | 34.3mg of granisetron delivering<br>3.1mg per 24 hours | 6 patches per prescription  |
| Sandostatin             | 50 mcg/mL  | 2700 mL every 90 days   |
| Sandostatin             | 100 mcg/mL   | 1350 mL every 90 days   |
| Sandostatin             | 500 mcg/mL   | 270 mL every 90 days  |
| Sandostatin             | 200 mcg/mL   | 720 mL every 90 days  |
| Sandostatin             | 1000 mcg/mL  | 180 mL every 90 days  |
| Sandostatin LAR         | 10 mg, 20 mg, 30 mg                                    | 3 kits every 84 days  |
| Selzentry               | 150 mg   | 180 tablets every 90 days   |
| Selzentry               | 300 mg   | 360 tablets every 90 days   |
| Serevent                | MDI inhaler  | 39 gm (3 inhalers of 13 gm) every 90 days   |
| Serevent Diskus         | All strengths  | 180 units (3 boxes of 60 blister packs) every 90 days                                   |
| Serostim injection      | All strengths  | 84 injections every 84 days   |
| Simponi                 | 50 mg  | 3 injections every 90 days  |
| Singulair               | All strengths (includes chewable)                      | 90 tablets every 90 days  |
| Skelaxin                | All strengths  | 360 tablets every 90 days   |
| Soma                    | 350 mg and 250 mg                                      | 360 tablets every 90 days   |
| Soma compound           | 325/200  | 720 tablets every 90 days   |
| Soma compound w/Codeine | 325/200/16   | 720 tablets every 90 days   |
| Somatuline Depot        | 60 mg, 90 mg, and 120 mg                               | 3 syringes every 84 days  |
| Somavert                | All strengths except 15 mg                             | 90 vials every 90 days  |
| Somavert                | 15 mg  | 180 vials every 90 days   |
| Sonata                  | All strengths  | 90 capsules every 90 days Limit also includes<br>Ambien, Ambien CR, Edluar, and Lunesta |
| Spiriva                 | 18 mcg Handihaler                                      | 90 capsules every 90 days   |
| Sprycel                 | All strengths  | 180 tablets every 90 days   |
| Stadol NS               | 10mg/ml nasal spray 2.5ml                              | 36 ml (12 bottles of 3 ml) every 90 days  |
| Strattera               | 10 mg, 18 mg, and 25 mg                                | 180 capsules every 90 days  |
| Strattera               | 40 mg, 60 mg, 80 mg, and 100 mg                        | 90 capsules every 90 days   |
| Striant                 | 30 mg  | 180 units every 90 days   |
| Suboxone                | All strengths  | 360 tablets every 90 days   |
| Subutex                 | All strengths  | 360 tablets every 90 days   |
| Supprelin LA            | 50 mg kit  | 1 kit every 365 days  |
| Symbicort               | All strengths  | 33 grams (3 inhalers) every 90 days   |

|  |  |  |
|--|--|--|
| Sutent                                 | 12.5 mg, 25 mg, and 50 mg                    | 56 capsules every 84 days                  |
| Symlin                                 | 0.6 mg/ml vial                               | 12 vials of 5ml (60 ml) every 90 days      |
| Symlin Pen                             | 60 - pen injector                            | 18 ml (12 pens) every 90 days              |
| Symlin Pen                             | 120 - pen injector                           | 33 ml (12 pens) every 90 days              |
| Tamiflu                                | 75 mg  | 84 capsules every 365 days                 |
| Tamiflu                                | 12 mg/ml                                     | 550 ml every 365 days                      |
| Tamiflu                                | 30 mg  | 40 capsules every 365 days                 |
| Tamflu                                 | 45 mg  | 20 capsules every 365 days                 |
| Tarceva                                | 25 mg  | 270 tablets every 90 days                  |
| Tarceva                                | 100 mg                                       | 90 tablets every 90 days                   |
| Tarceva                                | 150 mg                                       | 90 tablets every 90 days                   |
| Tasigna                                | 200 mg                                       | 360 capsules every 90 days                 |
| Tekturna                               | 150 mg and 300 mg                            | 90 tablets every 90 days                   |
| Tekturna HCT                           | 150 mg/12.5 mg, 150 mg/25 mg, 300 mg/12.5 mg | 90 tablets every 90 days                   |
| Temodar capsules                       | 250 mg                                       | 30 capsules every 90 days                  |
| Temodar capsules                       | 180 mg, 140 mg, 100 mg, 20 mg & 5 mg         | 60 capsules every 90 days                  |
| Tequin tablets                         | 400 mg                                       | 15 tablets per prescription                |
| Tequin teq-paq                         | 400 mg                                       | 15 tablets per prescription                |
| Tequin                                 | 200 mg                                       | 15 tablets every prescription              |
| Testim                                 | All strengths                                | 900 grams every 90 days                    |
| Thalomid capsules                      | 50 mg  | 84 capsules every 84 days                  |
| Thalomid capsules                      | 100 mg                                       | 252 capsules every 84 days                 |
| Thalomid capsules                      | 150 mg and 200 mg                            | 336 capsules every 84 days                 |
| Ticlid (including generic ticlopidine) | 250 mg                                       | 180 tablets every 90 days                  |
| Tilade                                 | All strengths                                | 119 gm (7 inhalers of 17 gm) every 90 days |
| Tobi nebulizer (vials)                 | 300 mg / 5 ml                                | 280 ml or 56 vials every 56 days           |
| Tolazamide                             | 250 mg                                       | 360 tablets every 90 days                  |
| Tolbutamide                            | all strenghts                                | 540 tablets every 90 days                  |
| Toradol                                | 10 mg tabletS                                | 20 tablets per prescription                |
| Toviaz ER                              | 4 mg and 8 mg                                | 90 tablets every 90 days                   |
| Tracleer tablets                       | 125 mg & 62.5 mg                             | 180 tablets every 90 days                  |
| Transderm-scop                         |  | 30 patches every 90 days                   |
| Travatan / Travatan Z                  | 0.004%                                       | 10 ml (4 bottles of 2.5 ml) every 90 days  |

|                                       |  |  |
|---------------------------------------|--|--|
| Trelstar depot                        | 3.75 mg  | 1 injection per prescription / 12 injections every 365 days  |
| Trelstar la injection                 | 11.25 mg                                       | 1 injection per prescription / 4 injections every 365 days   |
| Treximet                              | 85 mg-500 mg                                   | 54 tablets/ml/units every 90 days<br>Limit also includes all oral and nasal spray formulations of TRIPTANs (Amerge, Axert, Frova, Imitrex, Maxalt, Maxalt MLT, Relpax, Zomig, Zomig ZMT) |
| Tylenol w/codeine elixir              | 120/12   | 1500 ml every 90 days  |
| Tylenol w/codeine tablets             | All strengths                                  | 1170 tablets every 90 days   |
| Tyzeka                                | 600 mg   | 90 tablets every 90 days   |
| Ultracet                              | 325 mg/37.5 mg                                 | 720 tablets every 90 days  |
| Ultram                                | 50 mg  | 720 tablets every 90 days  |
| Ultram ER                             | 100 mg, 200 mg, and 300 mg                     | 90 tablets every 90 days   |
| Urispas (including generic flavoxate) | 100 mg   | 360 tablets every 90 days  |
| Valturna                              | All strenghts                                  | 90 tablets every 90 days   |
| Vantas                                | 50 mg kit                                      | 1 implant every 365 days   |
| Veramyst                              | 27.5 mcg Nasal Spray                           | 30 grams (3 bottles) every 90 days   |
| Vesicare                              | 5 mg and 10 mg                                 | 90 tablets every 90 days   |
| Viadur implant                        |  | 1 box every 365 days   |
| Vicodin                               | All tablet strengths                           | 450 tablets every 90 days Limit also includes Lorcet, Lortab   |
| Victoza                               | all strengths                                  | 9 pens (27 ml) every 90 days   |
| Vivelle                               | 0.025 mg, 0.0375 mg, 0.05 mg, 0.075 mg, 0.1 mg | 26 patches every 90 days   |
| Vivelle-DOT                           | 0.025 mg, 0.0375 mg, 0.05 mg, 0.075 mg, 0.1 mg | 26 patches every 90 days   |
| Votrient                              | 200 mg   | 360 tablets every 90 days  |
| Votrient                              | 400 mg   | 180 tablets every 90 days  |
| Vyvanse                               | 20 mg, 30 mg, 40 mg, 50 mg, 60 mg and 70 mg    | 30 capsules every 30 days  |
| Xalatan                               | 0.01%  | 10 ml (4 bottles of 2.5 ml) every 90 days  |
| Xeloda tablets                        | 150 mg   | 240 tablets every 90 days  |
| Xeloda tablets                        | 500 mg   | 480 tablets every 90 days  |
| Xenazine                              | 12.5 mg and 25 mg                              | 360 tablets every 90 days  |

|                             |                                |  |
|-----------------------------|--------------------------------|--|
| Xenical                     | 120 mg                         | 270 capsules every 90 days   |
| Xyrem oral soln             | 500 mg/ml                      | 1620 ml (9 bottles) every 90 days  |
| Xyzal                       | 5 mg                           | 90 tablets every 90 days   |
| Zaditor                     | 0.03%                          | 15 ml (3 bottles of 5 ml or 2 bottles of 7.5 ml) every 90 days   |
| Zavesca                     | 100 mg                         | 270 capsules every 90 days   |
| Zegerid (Omeprazole powder) | 20 mg and 40 mg packets        | 90 packets (3 box of 30 packets) every 90 days   |
| Zemplar                     | 1 OR 2 mcg                     | 90 capsules every 90 days  |
| Zemplar                     | 4 mcg                          | 36 capsules every 84 days  |
| Zithromax                   | 1 gm packet                    | 2 packets per prescription   |
| Zithromax                   | 250 mg                         | 12 tabs every 30 days  |
| Zithromax                   | 600 mg                         | 24 tablets every 84 days   |
| Zithromax                   | 500 mg                         | 6 tablets every 30 days  |
| Zmax                        | 2 gm powder                    | 2 packets per prescription   |
| Zofran                      | 24 mg                          | 10 tablets per prescription  |
| Zofran/Zofran ODT           | 4 mg                           | 42 tablets per prescription  |
| Zofran/Zofran ODT           | 8 mg                           | 30 tablets per prescription  |
| Zofran oral solution        | 4 mg / 5 ml                    | 210 ml per prescription  |
| Zomig/Zomig ZMT             | All strengths and dosage forms | 54 tablets/ml/units every 90 days<br>Limit also includes all oral and nasal spray formulations of TRIPTANs (Amerge, Axert, Frova, Imitrex, Maxalt, Maxalt MLT, Relpax, Treximet) |
| Zoladex implant             | 3.6 mg                         | 1 implant per prescription / 12 prescriptions every 365 days   |
| Zoladex implant             | 10.8 mg                        | 1 implant per prescription / 4 prescriptions every 365 days  |
| Zolinza                     | 100 mg                         | 360 capsules every 90 days   |
| Zorbtive                    | 8.8 mg                         | 84 vials every 84 days   |
| Zyflo/Zyflo CR              | 600 mg                         | 360 tablets every 90 days  |

**AGE LIMITS DRUG LIST**

**Limits will apply to drugs listed below as well as the generic equivalents**

| <b>Drug Name</b> | <b>Strength</b>                | <b>Dispensing Limit</b>                |
|------------------|--------------------------------|--|
| Alinia           | 100mg/5ml suspension           | Covered for members 1 year and above   |
| Alinia           | 500mg tablet                   | Covered for members 12 years and above |
| Amphetamines     | All strengths and formulations | Covered for members 3 years and above  |

|  |                                |   |
|--|--------------------------------|---|
| Benzodiazepines (including estazolam, quazepam, temazepam, triazolam)  | All strengths                  | Covered for members 18 years and above                    |
| Benzodiazepine (flurazepam)  | All strengths                  | Covered for members 15 years and above                    |
| Elidel   | 1%                             | Covered for members 2 years and above                     |
| Exjade   | All strengths                  | Covered for members 2 years and above                     |
| Femara   | 2.5 mg                         | Covered for females, Covered for males 18 years and below |
| Growth Hormones (including Genotropin, Humatrope, Norditropin, Nutropin, Omnitrope, Saizen, Tev-tropin)  | All strengths                  | Covered for members less than 18 years old                |
| Growth Hormones (including Serostim and Zorbtive)  | All strengths                  | Covered for members 18 years and above                    |
| Hypnotics (including Ambien, Lunesta, Sonata, and Rozerem)   | All strengths                  | Covered for members 18 years and above                    |
| Infertility Medications (including Clomid, Gonal F, Follistim, Bravelle, Ovidrel, Novarel, Pregnyl, Profasi HP, Chorionic Gonadotropin (generic and brands), Luveris, Repronex, Menopur, Ganirelix, Cetrotide) | All strengths                  | Cover for members less than or equal to 45 years old      |
| Intuniv  | 1 mg, 2 mg, 3 mg, and 4 mg     | Covered for members 6 years and above                     |
| Januvia  |                                | Covered for members 18 years and above                    |
| Ketek  | 400mg                          | Covered for members 18 years and above                    |
| Lovaza   | 1 gram                         | Covered for members 18 years and above                    |
| Lupron (leuprolide acetate)  | 5 mg/mL SQ injections          | Cover for members less than or equal to 45 years old      |
| Mecasermin rinfabate (including Increlex and Iplex)  | All strengths                  | Covered for members less than 18 years old                |
| Methylphenidate  | All strengths and formulations | Covered for members 6 years and above                     |
| Nucynta  | All strengths                  | Covered for members 18 years and above                    |
| Nuvigil  | All strengths                  | Covered for members 17 years and above                    |
| Onglyza  | All strengths                  | Covered for members 18 years and above                    |
| Phenergan (promethazine)   | All strengths                  | Covered for members 2 years and above                     |
| Protopic   | All strengths                  | Covered for members 2 years and above                     |
| Provigil   | All strengths                  | Covered for members 16 years and above                    |
| Raptiva  | All strengths                  | Covered for members 18 years and above                    |
| Relenza  | Aer Diskhale                   | Covered for members 5 years and above                     |
| Strattera  | All strengths                  | Covered for members 6 years and above                     |

|  |               |   |
|--|---------------|---|
| Tamoxifen                                    | All strengths | Covered for females, Covered for males 18 years and below |
| Testosterone                                 | All strengths | Covered for members 18 years and above                    |
| Tindamax                                     | All strengths | Covered for members 3 years and above                     |
| Tussionex and Tussionex Pennkinetic Extended | All strenghts | Covered for members 6 years and above                     |
| Vanos  | All strengths | Covered for members 12 years and above                    |
| Vectical                                     | All strengths | Covered for members 18 years and above                    |
| Viagra/Levitra/Cialis                        | All strengths | Covered for members 18 years and above                    |
| Xifaxan                                      | 200mg         | Covered for members 12 years and above                    |
| Zyflo  | All strengths | Covered for members 12 years and above                    |
| Zyrtec syrup                                 | 5 mg / 5 ml   | Covered for members 2 years and less                      |

**GENDER LIMITS DRUG LIST**

**Limits will apply to drugs listed below as well as the generic equivalents**

| <b>Drug Name</b>                                      | <b>Strength</b> | <b>Dispensing Limit</b>                                   |
|---|-----------------|---|
| Androderm   | All strengths   | Men Only  |
| Androgel  | All strengths   | Men Only  |
| Arimidex  | All strengths   | Women only  |
| Caverject   | All strengths   | Men Only  |
| Cialis  | All strengths   | Men Only  |
| Delatestryl   | All strenghts   | Men Only  |
| Depo-testosterone                                     | All strengths   | Men Only  |
| Edex  | All strengths   | Men Only  |
| Estrogen (oral contraceptives, estrogen combinations) | All strengths   | Women only  |
| Femara  | 2.5 mg          | Covered for females, Covered for males 18 years and below |
| Levitra   | All strengths   | Men Only  |
| Lotronex  | All strengths   | Women Only  |
| Muse  | All strengths   | Men Only  |
| Striant   | All strengths   | Men Only  |
| Tamoxifen   | All strengths   | Covered for females, Covered for males 18 years and below |
| Testim  | All strengths   | Men Only  |
| Testoderm   | All strengths   | Men Only  |
| Testopel  | All strengths   | Men Only  |

|   |               |          |
|---|---------------|----------|
| Testosterone Cypionate (all dosage forms available) | All strengths | Men Only |
| Testosterone Enanthate                              | All strengths | Men Only |
| Viagra  | All strengths | Men Only |